		WWW 77 2017
FINANCIAL	UNITED STATES HOUSE OF REPRESENTATIVES FORM B FORM B FOR New Members, Candidates, and New Employees	2017 JUN 20 AM 9: 24
Name:	Katheine L. Hill Daytime Telephone:	U.S. HÖÜLEĞI ALI ALEKIALIN EVI
2	New Member of or Candidate for State: CA U.S. House of Representatives District: 25 Candidates - Date of Election: \(\(\frac{1}{2}\triangle \triangle \frac{1}{2}\triangle \fra	(Office Use Only)
STATUS	New Officer or Employee Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant to to	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMIN	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	
A. Did you, yo a. Own any end of the b. Receive asset du	 A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Yes b. Receive more than \$200 in unsamed income from any reportable asset during the reporting period? Yes No Period or in the current calendar year up through the date of filing? Yes No No Period or in the current calendar year up through the date of filing?	g the reporting yes No No
C. Did you or you honoraria, or pen reporting period?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes No No
D. Did you, yo liablity (more	D. Did you, your spouse, or your dependent child have any reportable Yea No J. Did you receive compensation of more than isingle source in the current year and two prior	years? Yes No
	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO	COMPLETE
EXCLUSI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE	QUESTIONS
TRUSTS - D	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. His report details of such a trust that benefits you, your spouse, or dependent child?	lave you excluded Yes No
EXEMPTION exemption?	EXEMPTION Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	et all three tests for Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Katherine L. Hill Page 2 of 6

THE LANGE TO LOW LEADING	1 / // // /	2 1150	IX Tempera and find	IT Frank June Flow	UT LOCK February Count I Line		Examples	DC. Mega Corp Stock	\$	For benk and other cash accounts, total the amount in all bitures/basing accounts. If the total is over \$5,000, first every financial institution where there is more than \$1,000 in interest-benefing accounts. For annual and other need properly held for investment, provide a complete accineae or description, e.g., rental properly, and a city and state. For an ownerspic interest in a privately-hald business that is not publicly raded, state the name of the business, the nature of its activities, and its geographic location in Block A. Excitude: Your personal residence, including second homes and vacadion homes (unless there was rental encourse during the reporting particel; and any financial interest in, or income delayed from, a federal investment Program, including the Thrift Sevings Plan. If you so choose, you may include that an asset or income source is that of your spouse (SP) or dependent obling column on the failer. If you because in the state of your spouse (SP) or dependent obling column on PSOhedde A requirements, please rather to the instruction bookles.	For all WAs and other retirement plans (such as 401(t) plans) provide the value for each asset held in the eccount that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 as the end of the reporting period, and (b) any other reportable asset or source of moorand which generated more than \$200 in "unearned mooran during the year.	Assets and/or Income Sources	BLOCK A
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Kathering L. Hil

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SCHEDULE C - EARNED INCOME

Namo: Kathajne L. Hill	
Page 4 of 6	

ist the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer straight filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.
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INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff rate was \$27,485. The 2017 limit is \$27,785. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.	ome may apply to you after you like \$27,765. In addition, certaff.	u are on House payroll. The 2016 sin types of income (notably honoral	B limit on outside earned income for ria, director's fees, and payments for
Source (include date of receipt for honoraria)	Type		Amount
	1) pro	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Hororatium	\$0 \$0	\$500
EXAMPLES: CM War Roundtable (Cd. 2) Childre County Board of Education	Spouse Speech Spouse Salary	\$50 0.50	\$1,000
Penalo Assisting the Home loss	50/201	23.0	SEE BSIG

Name:
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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest arrount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you are a Member); loans secured by automobites, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the CRIRC, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

				DC, J.T.			
			Example				
	Morke	11.0	First Bank of Wilmington, DE	Creditor			
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			Mortgaga on Rental Property, Dover, DE	Type of Liability			
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				Over \$50,000,000			
				Over \$1,000,000* (Spouse/DC Liability)			

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, abor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campainzations), and positions select of an incorporary nature. New Members and second-year candidates report positions held in the reporting

		Charles Dieston Boo	Position	rendo and the current calendar year. First-year campingaces and new e
		Reople Actistant the Hume less	Namp of Organization	person and the current carefular year, error year carefulares and new emproyees report positions need in the current carefular year and two previous years.

Identify the date, parties to, and general terms of any agreement or arrangement that you continuation or deferral of payments by a former or current employer other than the U.S. amployer.	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date Parties to Agreement	Terms of Agreement
Nonp	
Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This customers of any corporation, firm, pertnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000, government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.	Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, pertnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information tested on Schedule C.
Source (Name and City/State)	Brief Description of Dutles
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
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W. K.	